



NOV. 19 2004

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NEKTAR THERAPEUTICS

NO. 075

P.2

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Kathy Honnert (Depositor's name)
Kathy Honnert (Signature)
November 19, 2004 (Date)

11/22/2004 HAHRED2 00000107 500348 10030392

01 FC:1501 1370.00 DA
02 FC:8001 30.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/030,392	06/06/2002	Mazen H. Hanna	0112.00	2257

TITLE OF INVENTION: METHOD OF PARTICLE FORMATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	303.00 1340.00	\$0	303.00 1340.00	11/26/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
JOHNSON, EDWARD M	1754	023-300000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Guy VucRucker

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

Nektar Therapeutica

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Carlos, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature

*Guy V. Tucker*Date November 19, 2004

Typed or printed name

Guy V. Tucker

Registration No. 45,302

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TO: Mail Stop Issue Fee**FROM:** Guy V. Tucker**COMPANY:** U.S. PTO**PHONE NUMBER:** (650) 620-5501**FAX NUMBER:** 703-746-4000**FAX NUMBER:** (650) 631-3125**PHONE NUMBER:****DATE:** November 19, 2004**RE:** U.S. Serial No. 10/030,392**NO. OF PAGES:** 2

(INCLUDING COVER)

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

Issue Fee Transmittal

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